

### **REMARKS**

Claims 1-12 are cancelled to expedite prosecution without prejudice to presentation of these claims in a continuation or divisional application. Claims 13, 14, 16-18, 20, 22 and 24 remain pending and under consideration in this application. Claims 13, 14, 16, 17 and 24 are currently amended. Support for the amendments to the claims lies in the specification as filed, for example, at page 10, lines 7-18. Support for "cyclosporin A" is found at page 5, line 26 to page 6, line 22, page 10, line 27 through Table 5, page 16, page 19, line 6 to page 22 line 23. Support for a dosage regime of cyclosporin A and 2-chlorodeoxyadenosine being administered can be found at least at page 10, line 27 to page 11, line 20, and Tables 2-6. Support for a dosing regime of daily cyclosporin A administration and 2-chlorodeoxyadenosine administered as a daily dose on 1-3 consecutive days during a period of about 7 to about 21 days is found at least at page 19, line 5 to page 20, line 19. No new matter has been added by virtue of the amendments contained herein.

Applicant appreciates the Examiner's entry and consideration of the Information Disclosure Statement filed 08/08/06.

#### **Claim Rejections Under 35 U.S.C. §103 (a)**

The Examiner has maintained the rejection under 35 USC § 103(a) of Claims 1-14, 16-18, 20, 22 and 24 as being unpatentable over Nawrocki et al. (*Transplantation Proceedings*, 28: 3538-3539, 1996) taken with Cramer et al. (*Transplantation Proceedings*, 29: 616, 1997) and Schmid et al. (*Eur. Surg. Res.*, 30: 61-68, 1998) and further in view of Kouwenhoven et al (*Transplant Int.* 13:385-401, 2000). Applicant respectfully traverses the rejection.

Claim 13 as currently amended is directed to a method of treating chronic allograft rejection in an allograft recipient in need of such treatment comprising administering cyclosporin A and 2-chlorodeoxyadenosine to the allograft recipient in a coordinated dosage regime comprising days on which both cyclosporin A and 2-chlorodeoxyadenosine are administered and days on which only cyclosporin A is administered. Claims 14, 16-18, 20, 22 and 24 depend on claim 13 and include the limitations of Claim 13.

Applicant submits that none of the cited references, either alone or in combination, disclose or suggest Applicant's invention as presently claimed. Furthermore, the process of optimizing the dosage and administration time "by starting doses of [a] compound at levels lower than required to achieve the desired therapeutic effect and to gradually increase the dosage until the desired effect is achieved" (Office Action dated 01/12/2007, page 7) would not lead one of ordinary skill in the art to the present claimed invention when the combination of references cited does not teach or suggest the desirability of a dosage regime other than the daily administration of both cyclosporin A and 2-chlorodeoxyadenosine. Thus, the rejection of Claims 13-14, 16-18, 20, 22 and 24 under 35 USC § 103(a) is unwarranted in view of the current amendments, and should be withdrawn.

### CONCLUSION

In light of the amendments and arguments presented herein, Applicant respectfully requests reconsideration and withdrawal of the outstanding rejection and allowance of the present claims under consideration. Early Notice to this effect is earnestly solicited in this case.

In the event a telephone discussion would be helpful in advancing the prosecution of the present case, Applicant requests that the Examiner telephone the undersigned at (508) 860-1472.

Respectfully submitted,

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